

RECEIVED  
SDNY PRO SE OFFICE

UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF NEW YORK

Michael Andrews

Write the full name of each plaintiff.

19 C: 5622

(Include case number if one has been assigned)

-against-

DHS / Theresa Green  
WYPD / James G. Clynes  
HRA

COMPLAINT

Do you want a jury trial?

☒ Yes ☐ No

Write the full name of each defendant. If you need more space, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed above must be identical to those contained in Section II.

NOTICE

The public can access electronic court files. For privacy and security reasons, papers filed with the court should therefore *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number. See Federal Rule of Civil Procedure 5.2.

If the defendant is an individual:

The defendant, DHS/NYPD/Theresa Green, is a citizen of the State of  
(Defendant's name)

or, if not lawfully admitted for permanent residence in the United States, a citizen or subject of the foreign state of

If the defendant is a corporation:

The defendant, DHS/NYPD/Theresa Green, is incorporated under the laws of the State of

and has its principal place of business in the State of NYC

or is incorporated under the laws of (foreign state)

and has its principal place of business in

If more than one defendant is named in the complaint, attach additional pages providing information for each additional defendant.

## II. PARTIES

### A. Plaintiff Information

Provide the following information for each plaintiff named in the complaint. Attach additional pages if needed.

Michael D Andrews  
First Name Middle Initial Last Name

3569 Dekalb Ave  
Street Address

Bronx NY 10467  
County, City State Zip Code

347-682-9751 mike33390d3a@gmail.com  
Telephone Number Email Address (if available)

**B. Defendant Information**

To the best of your ability, provide addresses where each defendant may be served. If the correct information is not provided, it could delay or prevent service of the complaint on the defendant. Make sure that the defendants listed below are the same as those listed in the caption. Attach additional pages if needed.

Defendant 1:

First Name	Last Name
Current Job Title (or other identifying information)	
Current Work Address (or other address where defendant may be served)	
County, City	State Zip Code

Defendant 2:

First Name	Last Name
Current Job Title (or other identifying information)	
Current Work Address (or other address where defendant may be served)	
County, City	State Zip Code

Defendant 3:

First Name	Last Name
Current Job Title (or other identifying information)	
Current Work Address (or other address where defendant may be served)	
County, City	State Zip Code

**INJURIES:**

If you were injured as a result of these actions, describe your injuries and what medical treatment, if any, you required and received.

**IV. RELIEF**

State briefly what money damages or other relief you want the court to order.

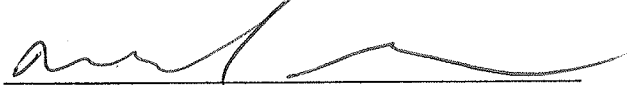
## V. PLAINTIFF'S CERTIFICATION AND WARNINGS

By signing below, I certify to the best of my knowledge, information, and belief that: (1) the complaint is not being presented for an improper purpose (such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation); (2) the claims are supported by existing law or by a nonfrivolous argument to change existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Federal Rule of Civil Procedure 11.

I agree to notify the Clerk's Office in writing of any changes to my mailing address. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Each Plaintiff must sign and date the complaint. Attach additional pages if necessary. If seeking to proceed without prepayment of fees, each plaintiff must also submit an IFP application.

6/14/19  
 Dated

  
 Plaintiff's Signature

Michael D D  
 First Name Middle Initial

Andrews  
 Last Name

3569 Dekalb Ave  
 Street Address

Bronx WY 10467  
 County, City State Zip Code

347-682-9751 mike333902@gmail.com  
 Telephone Number Email Address (if available)

682-9751 gmail.com

I have read the Pro Se (Nonprisoner) Consent to Receive Documents Electronically:

☒ Yes ☐ No

If you do consent to receive documents electronically, submit the completed form with your complaint. If you do not consent, please do not attach the form.



United States District Court  
Southern District of New York

## Pro Se (Nonprisoner) Consent to Receive Documents Electronically

Parties who are not represented by an attorney and are not currently incarcerated may choose to receive documents in their cases electronically (by e-mail) instead of by regular mail. Receiving documents by regular mail is still an option, but if you would rather receive them only electronically, you must do the following:

1. Sign up for a PACER login and password by contacting PACER<sup>1</sup> at [www.pacer.uscourts.gov](http://www.pacer.uscourts.gov) or 1-800-676-6856;
2. Complete and sign this form.

If you consent to receive documents electronically, you will receive a Notice of Electronic Filing by e-mail each time a document is filed in your case. After receiving the notice, you are permitted one "free look" at the document by clicking on the hyperlinked document number in the e-mail.<sup>2</sup> Once you click the hyperlink and access the document, you may not be able to access the document for free again. After 15 days, the hyperlink will no longer provide free access. Any time that the hyperlink is accessed after the first "free look" or the 15 days, you will be asked for a PACER login and may be charged to view the document. For this reason, *you should print or save the document during the "free look" to avoid future charges.*

### IMPORTANT NOTICE

Under Rule 5 of the Federal Rules of Civil Procedure, Local Civil Rule 5.2, and the Court's Electronic Case Filing Rules & Instructions, documents may be served by electronic means. If you register for electronic service:

1. You will no longer receive documents in the mail;
2. If you do not view and download your documents during your "free look" and within 15 days of when the court sends the e-mail notice, you will be charged for looking at the documents;
3. This service does *not* allow you to electronically file your documents;
4. It will be your duty to regularly review the docket sheet of the case.<sup>3</sup>

<sup>1</sup> Public Access to Court Electronic Records (PACER) ([www.pacer.uscourts.gov](http://www.pacer.uscourts.gov)) is an electronic public access service that allows users to obtain case and docket information from federal appellate, district, and bankruptcy courts, and the PACER Case Locator over the internet.

<sup>2</sup> You must review the Court's actual order, decree, or judgment and not rely on the description in the email notice alone. See ECF Rule 4.3

<sup>3</sup> The docket sheet is the official record of all filings in a case. You can view the docket sheet, including images of electronically filed documents, using PACER or you can use one of the public access computers available in the Clerk's Office at the Court.

500 PEARL STREET | NEW YORK, NY 10007  
300 QUARROPAS STREET | WHITE PLAINS, NY 10601

PRO SE INTAKE UNIT: 212-805-0175

## CONSENT TO ELECTRONIC SERVICE

I hereby consent to receive electronic service of notices and documents in my case(s) listed below. I affirm that:

1. I have regular access to my e-mail account and to the internet and will check regularly for Notices of Electronic Filing;
2. I have established a PACER account;
3. I understand that electronic service is service under Rule 5 of the Federal Rules of Civil Procedure and Rule 5.2 of the Local Civil Rules, and that I will no longer receive paper copies of case filings, including motions, decisions, orders, and other documents;
4. I will promptly notify the Court if there is any change in my personal data, such as name, address, or e-mail address, or if I wish to cancel this consent to electronic service;
5. I understand that I must regularly review the docket sheet of my case so that I do not miss a filing; and
6. I understand that this consent applies only to the cases listed below and that if I file additional cases in which I would like to receive electronic service of notices of documents, I must file consent forms for those cases.

### Civil case(s) filed in the Southern District of New York:

**Note:** This consent will apply to all cases that you have filed in this court, so please list all of your pending and terminated cases. For each case, include the case name and docket number (for example, John Doe v. New City, 10-CV-01234).

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---

Name (Last, First, MI)

---

Address

City

State

Zip Code

---

Telephone Number

E-mail Address

---

Date

Signature

### Return completed form to:

Pro Se Intake Unit (Room 200)  
500 Pearl Street  
New York, NY 10007



ORI No: NY030033J  
 Order No: \_\_\_\_\_  
 NYSID No: \_\_\_\_\_  
 CJTN No: \_\_\_\_\_

At a term of the Criminal Court, County of \_\_\_\_\_,  
 at the Courthouse at \_\_\_\_\_, State of New York

# ORDER OF PROTECTION

Non - Family Offenses - C.P.L. §530.13<sup>1</sup>  
 (Not involving victims of domestic violence)

Present: Hon. CHRYNES HON. JAMES G. CLYNES

☐ Youthful Offender (check if applicable)

Part: C Index/Docket No:

Indictment No., if any: 2017NY054635

Charges: 120. NC(1), et al

[Check one] ☐ Ex Parte ☒ Defendant Present In Court

THE PEOPLE OF THE STATE OF NEW YORK

-against-

Defendant.

Date of Birth: 6/24/83

NOTICE: YOUR FAILURE TO OBEY THIS ORDER MAY SUBJECT YOU TO MANDATORY ARREST AND CRIMINAL PROSECUTION WHICH MAY RESULT IN YOUR INCARCERATION FOR UP TO SEVEN YEARS FOR CONTEMPT OF COURT. IF THIS IS A TEMPORARY ORDER OF PROTECTION AND YOU FAIL TO APPEAR IN COURT WHEN YOU ARE REQUIRED TO DO SO, THIS ORDER MAY BE EXTENDED IN YOUR ABSENCE AND THEN CONTINUES IN EFFECT UNTIL A NEW DATE SET BY THE COURT.

☒ TEMPORARY ORDER OF PROTECTION - Whereas good cause has been shown for the issuance of a temporary order of protection as a condition of ☒ recognizance ☐ release on bail ☐ adjournment in contemplation of dismissal.

☐ ORDER OF PROTECTION - Whereas defendant has been convicted of [specify crime or violation] \_\_\_\_\_;

And the Court having made a determination in accordance with section 530.13 of the Criminal Procedure Law,

IT IS HEREBY ORDERED that the above-named defendant observe the following conditions of behavior:

[Check applicable paragraphs and subparagraphs]:

- ☒ Stay away from \_\_\_\_\_ [name(s) of protected person(s) or witness(es)] Theresa Green  
 and/or from the \_\_\_\_\_  
☒ home of \_\_\_\_\_  
☒ school of \_\_\_\_\_  
☒ business of \_\_\_\_\_  
☒ place of employment of \_\_\_\_\_  
☐ other \_\_\_\_\_
- ☒ Refrain from communication or any other contact by mail, telephone, e-mail, voice-mail or other electronic or any other means with [specify protected person(s)] John
- ☒ Refrain from assault, stalking, harassment, aggravated harassment, menacing, reckless endangerment, disorderly conduct, criminal mischief, sexual abuse, sexual misconduct, forcible touching, intimidation, threats or any criminal offense or interference with the victim or victims of, or designated witnesses to, the alleged offense and such members of the family or household of such victim(s) or witness(es) as shall be specifically named [specify] John
- ☐ Refrain from intentionally injuring or killing without justification the following companion animal(s) (pet(s)) [specify type(s) and, if available, names(s)]: \_\_\_\_\_
- ☐ Surrender any and all handguns, pistols, revolvers, rifles, shotguns and other firearms owned or possessed, including, but not limited to, the following \_\_\_\_\_ and do not obtain any further guns or other firearms. Such surrender shall take place immediately, but in no event later than [specify date/time] \_\_\_\_\_ at \_\_\_\_\_;
- ☐ Specify other conditions defendant must observe for the purpose of protection \_\_\_\_\_

IT IS FURTHER ORDERED that the above-named Defendant's license to carry, possess, repair, sell or otherwise dispose of a firearm or firearms, if any, pursuant to Penal Law §400.00, is hereby ☒ suspended or ☐ revoked (Note: Final Order Only), and/or ☒ the Defendant shall remain ineligible to receive a firearm license during the period of this order. (Check all applicable boxes.) NOTE: If this paragraph is checked, a copy of this form must be sent to: New York State Police, Pistol Permit Section, State Campus Building #22, 1220 Washington Avenue, Albany, New York 12226-2252.

IT IS FURTHER ORDERED that this order of protection shall remain in force until and including [specify date] 11-22-19

DATED: 5/23/19

HON. JAMES G. CLYNES  
 JUDGE / JUSTICE  
 Court (Court Seal)

☒ Defendant advised in Court of issuance and contents of Order.

☐ Order personally served on Defendant in Court: \_\_\_\_\_

(Defendant's signature)

☐ Order to be served by other means [specify]: \_\_\_\_\_

☐ Warrant issued for Defendant.

☐ ADDITIONAL SERVICE INFORMATION: [specify]: \_\_\_\_\_

The Criminal Procedure Law provides that presentation of a copy of this order of protection to any police officer or peace officer acting pursuant to his or her special duties shall authorize and in some situations may require, such officer to arrest a defendant who is alleged to have violated its terms and to bring him or her before the Court to face penalties authorized by law.

Federal law requires that this order be honored and enforced by state and tribal courts, including courts of a state, the District of Columbia, a commonwealth, territory or possession of the United States, if the person against whom the order is sought is an intimate partner of the protected party and has been or will be afforded reasonable notice and opportunity to be heard in accordance with state law sufficient to protect that person's rights (18 U.S.C. §§2265, 2266).

It is a federal crime to:

- cross state lines to violate this order or to stalk, harass or commit domestic violence against an intimate partner or family member;
- buy, possess or transfer a handgun, rifle, shotgun or other firearm or ammunition while this Order remains in effect (Note: there is a limited exception for military or law enforcement officers but only while they are on duty); and
- buy, possess or transfer a handgun, rifle, shotgun or other firearm or ammunition after a conviction of a domestic violence-related crime involving the use or attempted use of physical force or a deadly weapon against an intimate partner or family member, even after this Order has expired. (18 U.S. after this Order C. §§922(g)(8), 922(g)(9) 2261, 2261A, 2262).

<sup>1</sup> Use this form for non-family offense orders of protection, issued pursuant to CPL §530.13, that are not issued to protect victims of domestic violence, as defined by Criminal Procedure Law §530.11(1) or Soc. Serv. Law §459-a and are not entered onto the statewide domestic violence registry. See Exec. L. §221-a(1); CPL §§530.11(1), 530.12(1), 530.13.



**RUBENSTEIN & RYNECKI**

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CHAD RUSSELL  
HARRIS MARKS\*

\* ADMITTED IN NY & NJ

SEPTEMBER 19, 2018

MICHAEL ANDREWS  
1088 ANDERSON AVE APT 2  
BRONX,, N.Y. 10452

Dear CLIENT:

Please be advised that the Court has set your case down for Trial as detailed below:

Date: OCTOBER 26, 2018

Time: 9:00 A.M.

Please make arrangements to be available in our office on this date.

**CALL THIS OFFICE THE BUSINESS DAY PRIOR TO YOUR TRIAL DATE BY 12:00 P.M. TO CONFIRM YOUR ATTENDANCE.**

Thank you for your cooperation in this matter.

Very truly yours,

  
\_\_\_\_\_  
JACK JACILLA

My Lawyer

Help them

cover it up

STATE OF NEW YORK  
OFFICE OF TEMPORARY AND DISABILITY ASSISTANCE

REQUEST: September 12, 2017  
CASE #: 00009204253A  
CENTER #: 23  
FH #: 7606890M

In the Matter of the Appeal of

Michael Andrews

from a determination by the New York City  
Department of Social Services

:  
: **DECISION**  
: **AFTER**  
: **FAIR**  
: **HEARING**  
:  
:

**JURISDICTION**

Pursuant to Section 22 of the New York State Social Services Law (hereinafter Social Services Law) and Part 358 of Title 18 NYCRR, (hereinafter Regulations), a fair hearing was held on November 15, 2017, in New York City, before Leslie Deutsch, Administrative Law Judge. The following persons appeared at the hearing:

For the Appellant

Michael Andrews, Appellant

For the Social Services Agency

Barbara Nibot, Fair Hearing Representative

**ISSUE**

Was the Agency's computation of Appellant's entitlement to Public Assistance benefits for the period of February 1, 2017 to the present correct?

Was the Agency's computation of Appellant's entitlement to SNAP benefits for the period of September 12, 2016 to the present correct?

Was the determination of the Agency not to provide the Appellant with a restaurant allowance correct?

078-704236

Mr Solomon



Mount  
Sinai  
Hospital

**Munjal, Kevin G**

1468 MADISON AVENUE  
NEW YORK, NY 10029

Mount Sinai Radiology  
1 Gustave Levy Place  
New York, NY 10029  
(212) 241-8333

Center for Advance Medicine  
17 East 102nd Street, 6th Floor  
New York, New York 10029  
(212) 824-7700  
(212) 824-2323 (fax)

**RE: ANDREWS, MICHAEL**

**Patient #: 7366024 sex/age M/34 Years**

**(RM) EXUELL - RM ELBOW LEFT 9451109 9/21/17**

(RM)EXUWRL-RM WRIST LEFT 9451107 09/21/2017

(RM)EXUFOL-RM FOREARM RADIUS AND ULNA LEFT 9451108 09/21/2017

Dx Codes: Z04.3

**History:** EPIC: Reason for Exam?: struck w/ baton on forearm ,

**S/S:** EPIC: Reason for Exam?: struck w/ baton on forearm ,

---

History: Struck with baton on forearm.

Technique: AP and lateral views of the left elbow and forearm were obtained. Additionally, AP, oblique, and lateral radiographs of the left wrist were obtained. Total of 8 images were reviewed.

Comparison/correlation: None available.

Findings/  
impression:

The bones are normally mineralized. No acute fracture or dislocation is noted. There is no periosteal reaction or osseous destruction. The joint spaces are preserved. The soft tissues are unremarkable.

Attending physician note:

I have personally reviewed the images and resident's interpretation thereof and agree with the findings.

**Attending Radiologist:** Jeremy Grubin

Transcribed by:

Finalized on: 9/22/2017 10:20:06AM

4:50:14PM

Commissure Interface

Transcribed on: 9/21/2017

---

Jeremy Grubin, signed on 09/22/2017 10:20

Contributing Provider(s): Xi Yang

11-MAY-19 12:34

Court Case Data Entry (CC)

BK&CS: 3491902966	Name: ANDREWA, MICHAEL	NYSID: 13937489Z
Status: DE	Total Open Cases: 2	Case#: 2
Docket #: CR-015717-19NY	Indict. #: 00000 0000	Consl.Indict. #:
Disposition: CTD	Case Continued	Dte Opened: 11-MAY-19 Closed:
Nxt Crt Dte: 16-MAY-19	Hour: 09 Part: F	Boro: N Crt Type: CC Veh Pri: 2
Charge: 120.05	ASSAULT 2	Severity: FD
Charge:		Severity:
Charge:		Severity:
Charge:		Severity:
Charge:		Severity:
Cnvct Dte:	Remand?:N Bond: 3,500	Bail: 3,500 Cr Card:
Sent Date:	Reimb Date:	Surety Exam?:N
YEARS MONTHS DAYS		
Minimum Sentence:		
Maximum Sentence:		
Consecutive Sentence ?: N		
Remarks:		

Branch to:

INM\_CASE\_MAINT

DTISO Jail  
 Staff

CRIMINAL COURT OF THE CITY OF NEW YORK

Docket Number

Arraignment Date

Arraignment Judge

You are to appear in Court on \_\_\_\_\_  
Street, New York, N.Y. 10013.

6-20

by 9:30 A.M. at Part \_\_\_\_\_

C

located at 100 Centre

Your bail has been fixed at

\$ \_\_\_\_\_

Insurance Company Bail Bond.

or

\$ \_\_\_\_\_

Cash Bail.

If you are released and you fail to appear at the time, date, and place indicated above,  
A Warrant for your Arrest will be issued.

Your Bail, if any, will be forfeited.

You may be charged with the crime of Bail Jumping.

If you are committed:

You have the right to communicate with relatives or friends by letter or telephone free of charge.

You have the right to the aid of counsel at every stage of the proceedings.

If you desire counsel and are financially unable to obtain counsel, counsel shall be assigned to you.

**PLEASE BRING THIS NOTICE WITH YOU WHENEVER YOU APPEAR IN COURT.**

CRC 3019 (8/92)

(over) (sigue)